

Planning & Environmental Services Department

905 NW 8th Street

Bentonville, AR 72712

(479) 271-1003

<http://www.bentoncountyar.gov>



RECEIVED
Date Stamp

AUG 29 2013

BENTON COUNTY
PLANNING

SITE PLAN REVIEW APPLICATION (Form P5)

Site Plan Review for Large Scale Development (LSD) is applicable for all non-residential, non-agricultural development including new development, redevelopment, building additions, the establishment of new enterprise in previously residential or agricultural building and/or lot, and a significant change in use.

Project Type: New Submittal ☒ Resubmittal ☐ Amended Site Plan ☐

INSTRUCTIONS FOR APPLICANT:

New addition

Applications must be submitted in person. Please make an appointment with a planner to discuss the proposed development and to determine if a complete application is submitted.

Review Site Plan Review Regulations, Planning Board Calendar including meeting schedules.

Applicant's checklist

	Item	Provided (Yes/No)
1.	Completed application with notarized original signatures	✓
2.	Complete Authorization and Right to Enter Site Form	✓
3.	Fee- \$300.00	✓
4.	Initial submission: Legible Site Plans to scale - 5 copies Final Approved Plan: 4 originals, no greater than 18"x24"	waiver
5.	CD/Memory stick of all drawings and complete application form	waiver
6.	Relevant forms on pages 6-11 (incl.), as applicable.	✓
7.	Submit all relevant State and federal Permits	waiver

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

PRE-SUBMISSION CONSULTATION: pre submission consultation with the County planning staff is suggested to ensure an efficient site plan review process. Please ensure that detailed site plan and submission packet is available during pre-consultation. Planning staff will sign off once pre consultation is completed.

Amber Beale
Name of Planning staff

8.29.13
Date of consultation



BENTON COUNTY SITE PLAN APPLICATION

1. APPLICANT, REGISTERED OWNER AND AGENT INFORMATION

Provide in full the name of the registered owner, agent/ applicant (if different than the owner) contact details. If the registered owner is a numbered company, provide the name of the principals of the company. If there is more than one owner, copy this page, complete in full and submit with this application.

An authorized applicant and agent for the owner must attach a notarized letter of authorization from the legal property owner. Written authorization from the legal property owner is required at the time of application or the documents will not be accepted.

Note: All communication will be maintained with the Agent unless otherwise requested by the owner in writing.

Property Owner

Name: Larry Jenkins Contact Person: Larry
 Address: 14644 E Hwy 62 Garland AR Postal Code: 72732
 Phone: 479-799-9227 Fax: _____
 Email: Larry@ozarkmtn.com

Applicant (If other than the Property Owner) Please complete Form A, attached

Name: _____ Contact Person: _____
 Address: _____ Postal Code: _____
 Phone: _____ Fax: _____
 Email: _____

Agent Authorized by the Owner to File the Application (if applicable) – Please complete Form B, attached

Name: _____ Contact Person: _____
 Address: _____ Postal Code: _____
 Phone: _____ Fax: _____
 Email: _____

NOTARIZED OWNER CERTIFICATION

I certify under penalty of the laws of the State of Arkansas that I am the property owner of the property that is the subject matter of this application and I am authorizing to and hereby do consent to the filing of this application, acknowledge that the final approval by Benton County, if any, may result in restrictions, limitations and construction obligations being imposed on this real property and hereby authorize Benton County Staff to enter my property for the duration of the review.

Owner/Authorized Agent Signature: _____

Date: 8/29/13

Print Name: Larry Jenkins

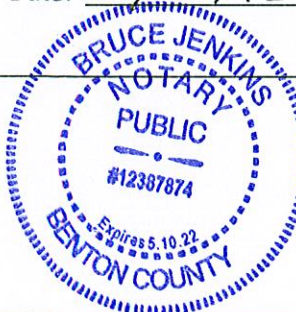
State of Arkansas

County of BENTON

Subscribed and sworn to before me this 29th day of August 2013.

Burke
 NOTARY PUBLIC

5-10-22
 My Commission expires





BENTON COUNTY SITE PLAN APPLICATION

2. ARCHITECT/ ENGINEER/ SURVEYOR INFORMATION (Copy this page for each professional, if applicable)

Name: David Platz Contact Person: David Platz
 Address: P.O. Box 223
 City: Bentonville AR Postal Code: 72712
 Phone: 479-366-7989 Fax: _____
 Email: _____

3. DESCRIPTION OF SUBJECT PROPERTY

a. Address: 14644 E. HWY 62 Garfield AR 72732
 b. Assessor's Parcel Number (s): 18-04259-000
 c. Site Area (acres/ square feet): 1.26 Acres
 d. Area of Development (acres/ square feet): 1200 square feet

4. DETAILED DESCRIPTION OF PROPOSED DEVELOPMENT (use additional pages as required)

a. Existing Land Use: No Change
 b. Proposed Development: Warehouse Storage

c. Gross Floor Area(square feet)

	Existing Building (s)	Proposed(new)			Total GFA (Existing + Proposed)
GFA	<u>3200 sq.ft.</u>	<u>1200 sq.ft.</u>			<u>4400 sq.ft.</u>
If Phased Development		Phase I	Phase II	Phase III	

d. Parking/Loading Spaces

	Existing	Proposed (New)			Total
No. of Parking Spaces	<u>30</u>	<u>1 ADA</u>			<u>31</u>
If Phased Development		Phase I	Phase II	Phase III	
Total Loading Spaces					
If Phased Development					

Required
 = 22 spaces
 1 ADA

BENTON COUNTY SITE PLAN APPLICATION



e. Description of Screening/Buffer

Proposed Screening	Existing			Proposed
Wood fence (length and location)	west side 276.05'	North 227.43'	East 107'	Between Residence + Warehouse Privacy Fence None
Landscape Buffer (length and location)				No Change
Other - Describe				

f. Building setbacks

	Existing Buildings	Proposed buildings
Front setback	South 160'	
Side setback	West 76'	

g. Access to Subject Lands: Check all that apply

- ☐ County Road, Name
☐ Private easement, Describe

☒ Highway, Name HWY 62

h. Water, Sanitary Sewage and Storm Drainage: Check all that apply

Water- Indicate the source of water on-site

- ☒ Public water supply ☐ Private/Semi Private well

Sanitary- Indicate the type of sewage disposal facility: Check all that apply

- ☐ Publicly owned and operated sanitary sewage system
☒ Privately owned and operated individual septic system
☐ Other

Have you received approval from Health Department?

- ☐ Yes ☒ No ☐ Approval awaited (Date)

Storm Drainage- Indicate how storm drainage will be provided on-site: Check all that apply

- ☒ Ditches ☐ Swales ☐ Retention pond
☐ Detention pond ☐ Bio retention pond
☐ Low Impact Development options, describe ☐ Other

5. I confirm that the information contained in this application and accompanying documents is accurate to the best of my knowledge.

I hereby acknowledge that it is my responsibility to ensure that I am in compliance with all applicable laws, regulations, and permits at the State or Federal levels.

Name and Signature

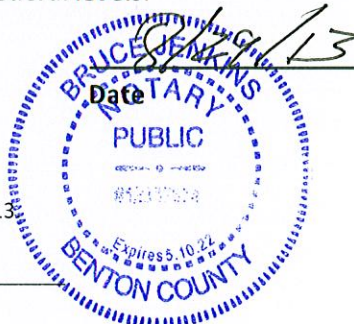
State of Arkansas

County of Benton

Subscribed and sworn to before me this 29th day of August 2013

NOTARY PUBLIC

My Commission expires 5-10-22



FORM E – VARIANCE/WAIVER REQUEST

Dear Benton County Planning Board Members:

I am requesting a variance/waiver (please circle one) from the Benton County Planning Regulations for the following reason(s):

From the original drawings to the minor nature of the addition.


Owner/Applicant/Authorized Agent

8/29/2013
Date

FORM E – VARIANCE/WAIVER REQUEST

Dear Benton County Planning Board Members:

I am requesting a variance/waiver (please circle one) from the Benton County Planning Regulations for the following reason(s):

*Storm Wtr Mgmt Plan due to the minor
nature of the building addition.*


Owner/Applicant/Authorized Agent

8/29/2013
Date

BENTON COUNTY SITE PLAN APPLICATION



OFFICE USE ONLY

6. APPLICATION CHECKLIST- To be filled by a planning staff

	Item	Provided (Yes/No)	Comment
1.	Name of Planning Jurisdiction		Pea Ridge (outside 1 mile)
2.	Completed application with notarized original signatures	yes	
3.	Complete Authorization and Right to Enter Site Form	yes	
4.	Fee- \$300.00	yes	
5.	Legible Site Plans to scale- 5 copies		applied for a waiver - has survey with sketch
6.	CD/Memory stick of all drawings and complete application form		" "
7.	Property deed and or offer to purchase		
8.	Relevant forms on pages 6-11 (incl.), as applicable. Other	yes	
9.	All relevant State and federal Permits		applied for waiver for Stormwater plan

7. APPLICATION DETAILS

Planner initial if Application complete for processing

AB

Date:

8.29.13

Application Fee: \$

300.-

Receipt No.:

7061

Date:

8.29.13

Assigned File No.:

13-311

Related Planning File No.:

Highway RV

Date of Planning Board Meeting (TAC):

09.04.2013

Is the subject property located in a Floodplain?

☐ Yes☒ No

Is the subject property located in County's MS4 area?

☐ Yes☒ No

Additional Notes

Prior approval for 800 SF addition in 2008; waiver from LSD requirements were granted by PB on 6/17/2008.

FORM A - NOTARIZED AUTHORIZATION OF REGISTERED OWNER FOR THE APPLICANT (OTHER THAN THE OWNER) TO SUBMIT THE APPLICATION

If the applicant is not the registered owner of the land that is subject of this application, the written authorization of the registered owner that the applicant is authorized to make the application must be included with this application form and the authorization below must be completed.

I (We), _____,
(owner of the subject land, address or parcel No.)

hereby authorize and instruct _____
(applicant)

to submit an application to the Benton County Planning Department. This shall be my (our) good and sufficient authority to act on my (our) behalf and to negotiate or bond on my behalf.

(Sign) Date

Note: if the owner is a corporation, affix seal (if any)

FORM B - NOTARIZED AUTHORIZATION OF REGISTERED OWNER FOR THE AGENT (OTHER THAN THE OWNER) TO SUBMIT THE APPLICATION AND BE THE ONLY POINT OF CONTACT WITH BENTON COUNTY PLANNING DEPARTMENT

I (We), _____,
(owner of the subject land, address or parcel No.)

hereby authorize and instruct _____
(agent)

to submit an application to the Benton County Planning Department. This shall be my (our) good and sufficient authority to act on my (our) behalf and to negotiate or bond on my behalf.

(Sign) Date

Note: if the owner is a corporation, affix seal (if any)

FORM C - PERMISSION TO ENTER THE SUBJECT PROPERTY

I hereby authorize the Planning Board and/or staff of Benton County, Arkansas to enter upon the subject lands and premises for the purpose of evaluating the merits of this application and subsequently to conduct any inspections and work on the subject lands that may be required as a condition of approval. This is their authority for doing so.

Subject lands: _____

Signature of owner Date

State of Arkansas

County of _____

Subscribed and sworn to before me this _____ day of _____ 2013.

NOTARY PUBLIC

My Commission expires

FORM D – HAZARDOUS CHEMICAL COMPLIANCE FORM

BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT AND HOMELAND SECURITY

215 E. CENTRAL AVE #7, BENTONVILLE, AR 72712

Phone: 479-271-1004

Fax: 479-271-1084

BUSINESS NAME: Ozark Mt. Trading Co. TYPE OF BUSINESS: Retail
OWNER'S NAME: Larry Jenkins
PHYSICAL LOCATION/ADDRESS: 14644 E Hwy 62 Garfield AR 72732
MAILING ADDRESS: Same
CONTACT PHONE NUMBER: 479-799-9227
CONSULTANT/ENGINEER: _____

A LETTER WILL BE SENT TO THE BUSINESS OWNER AND THE PLANNING OFFICE.

IF THERE ARE OTHER LOCATIONS PLEASE SPECIFY: _____

WILL THERE BE CHEMICALS STORED AT THIS FACILITY? YES _____ NO X

IF YES – LIST NAME AND QUANTITIES BELOW:

_____	_____
_____	_____
_____	_____

BY SIGNING BELOW, I ACKNOWLEDGE THAT ALL INFORMATION ABOVE IS TRUE AND CORRECT. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY THE BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT IF THIS INFORMATION CHANGES.

Larry Jenkins 8/29/13
OWNER SIGNATURE DATE

BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT ONLY

LETTER COMPLETED BY _____
DEM OFFICER DATE